Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

Filing at a Glance

Company: Life Insurance Company of Alabama

Product Name: LOA Unl Ca Rate 2009 SERFF Tr Num: WAKE-126265759 State: Arkansas TOI: H07I Individual Health - Specified Disease SERFF Status: Closed-Approved State Tr Num: 43228

- Limited Benefit Closed

Sub-TOI: H07I.002A Dread Disease - Cancer Co Tr Num: State Status: Approved-Closed

Only

Filing Type: Rate Reviewer(s): Rosalind Minor

Author: Jennifer Snell Disposition Date: 09/02/2009
Date Submitted: 08/13/2009 Disposition Status: Approved-

Closed

Implementation Date Requested: 11/01/2009 Implementation Date:

State Filing Description:

General Information

Project Name: Life Insurance Company of Alabama Status of Filing in Domicile: Pending

Project Number: 082009 Date Approved in Domicile:

Requested Filing Mode: Review & Approval Domicile Status Comments: This filing is

currently pending in the home domicile state of

Alabama as of this time.

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Size:

Overall Rate Impact: 15%

Group Market Type:

Filing Status Changed: 09/02/2009 Explanation for Other Group Market Type:

State Status Changed: 09/02/2009

Deemer Date: Created By: Jennifer Snell

Submitted By: Jennifer Snell Corresponding Filing Tracking Number:

Filing Description: SUBMISSION

RATE INCREASE FILING

INDIVIDUAL CANCER PLANS WITH UNLIMITED CHEMOTHERAPY BENEFITS

FORM NUMBERS: CA-AK-1984, HIC-700-388, HC3991, HC597-97

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

The Company is requesting a rate of 15.0% increase in premiums. The rate increase will become effective on the later of the next premium due date after approval or 12 months from the last rate increase implementation date.

Company and Contact

Filing Contact Information

Jennifer Snell, Compliance Analyst jennifer.snell@wakelyactuarial.com 34125 US Highway N 727-373-4558 [Phone] 2121 [Ext]

Suite 310 727-373-4559 [FAX]

Palm Harbor, FL 34684

Filing Company Information

(This filing was made by a third party - WAS01)

Life Insurance Company of Alabama CoCode: 65412 State of Domicile: Alabama

302 Broad Street Group Code: -99 Company Type:
Gadsden, AL 35901 Group Name: State ID Number:

(256) 543-2022 ext. [Phone] FEIN Number: 63-0321291

Filing Fees

Fee Required? Yes
Fee Amount: \$200.00

Retaliatory? No

Fee Explanation: \$50.00 per rate filing X 4 forms

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Life Insurance Company of Alabama \$200.00 08/13/2009 29840373

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Rosalind Minor	09/02/2009	09/02/2009

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

Disposition

Disposition Date: 09/02/2009

Implementation Date: Status: Approved-Closed

Comment:

We have approved your request of a 15% level rate increase on this submission. The approval is subject to the following conditions:

- 1. Rate increases will not be given prior to the first annual anniversary date of any policy.
- 2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
- 3. All increases in rates, other than a change in age or an individual moving to another geographical area, must be submitted to our Department for approval.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Life Insurance Company of Alabama	15.000%	15.000%	\$5,896	32	\$39,306	15.000%	15.000%

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

ScheduleSchedule ItemSchedule Item StatusPublic AccessSupporting DocumentHealth - Actuarial JustificationApproved-ClosedNoSupporting DocumentAuthorization LetterApproved-ClosedYesRateRate PageApproved-ClosedYes

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 25.000%

Effective Date of Last Rate Revision: 11/01/2008

Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Written	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders	Premium for	Change (where	Change (where
	Change:		Change for	Affected for this	this Program:	required):	required):
			this	Program:			
				•			
			Program:	· ·			

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

Rate/Rule Schedule

Schedule Document Name: Affected Form Rate Rate Action Information: Attachments

Item Numbers: Action:*

Status: (Separated with

commas)

Approved- Rate Page CA-AK-1984, New AR Rates Closed HIC-700-388, 2009.pdf

09/02/2009 HC3991, HC597-

97

Life Insurance Company of Alabama (NAIC #65412) <u>Actuarial Memorandum for Individual A&H Rate Increase</u>

Exhibit A - Alabama Current and Proposed Premium Schedule

				Current	Proposed	
		_		Annual	Increase	Proposed
<u>Plan</u>	Coverage	<u>Type</u>	Issue Age	<u>Premium</u>	Percent 1	Rates
C13	Individual	Direct	0-60	2,748.45	15.0%	3,160.72
C13	Individual	Direct	61-75	4,711.62	15.0%	5,418.36
C13	Individual	Payroll	0-99	1,963.19	15.0%	2,257.67
C13	Family	Direct	0-60	4,711.62	15.0%	5,418.36
C13	Family	Direct	61-75	7,460.11	15.0%	8,579.13
C13	Family	Payroll	0-99	3,337.40	15.0%	3,838.01
C22	Individual	Direct	0-60	2,931.12	15.0%	3,370.79
C22	Individual	Direct	61-75	5,049.77	15.0%	5,807.24
C22	Individual	Payroll	0-99	2,290.39	15.0%	2,633.95
C22	1P Family	Direct	0-60	3,381.03	15.0%	3,888.18
C22	1P Family	Direct	61-75	5,460.35	15.0%	6,279.40
C22	1P Family	Payroll	0-99	2,631.22	15.0%	3,025.90
C22	2P Family	Direct	0-60	5,017.04	15.0%	5,769.60
C22	2P Family	Direct	61-75	7,934.55	15.0%	9,124.73
C22	2P Family	Payroll	0-99	3,871.85	15.0%	4,452.63
C23	Individual	Direct	0-60	2,931.12	15.0%	3,370.79
C23	Individual	Direct	61-75	5,049.77	15.0%	5,807.24
C23	Individual	Payroll	0-99	2,290.39	15.0%	2,633.95
C23	1P Family	Direct	0-60	3,381.03	15.0%	3,888.18
C23	1P Family	Direct	61-75	5,460.35	15.0%	6,279.40
C23	1P Family	Payroll	0-99	2,631.22	15.0%	3,025.90
C23	2P Family	Direct	0-60	5,017.04	15.0%	5,769.60
C23	2P Family	Direct	61-75	7,934.55	15.0%	9,124.73
C23	2P Family	Payroll	0-99	3,871.85	15.0%	4,452.63
C27	Individual	Direct	0-60	3,121.81	15.0%	3,590.08
C27	Individual	Direct	61-75	4,998.85	15.0%	5,748.68
C27	Individual	Payroll	0-99	2,015.34	15.0%	2,317.64
C27	1P Family	Direct	0-60	3,734.31	15.0%	4,294.46
C27	1P Family	Direct	61-75	6,006.52	15.0%	6,907.50
C27	1P Family	Payroll	0-99	2,410.49	15.0%	2,772.06
C27	2P Family	Direct	0-60	5,117.39	15.0%	5,885.00
C27	2P Family	Direct	61-75	8,179.93	15.0%	9,406.92
C27	2P Family	Payroll	0-99	3,931.93	15.0%	4,521.72

Life Insurance Company of Alabama (NAIC #65412) Actuarial Memorandum for Individual A&H Rate Increase

Exhibit A - Alabama Current and Proposed Premium Schedule

				Current	Proposed	
				Annual	Increase	Proposed
<u>Plan</u>	<u>Coverage</u>	<u>Type</u>	<u>Issue Age</u>	<u>Premium</u>	<u>Percent</u>	<u>Rates</u>
C39	Individual	Direct	0-39	782.10	15.0%	899.42
C39	Individual	Direct	40-54	946.75	15.0%	1,088.76
C39	Individual	Direct	55-69	1,440.71	15.0%	1,656.82
C39	Individual	Direct	70-79	1,770.01	15.0%	2,035.51
C39	Individual	Payroll	0-99	782.10	15.0%	899.42
C39	1P Family	Direct	0-39	938.53	15.0%	1,079.31
C39	1P Family	Direct	40-54	1,136.11	15.0%	1,306.53
C39	1P Family	Direct	55-69	1,728.84	15.0%	1,988.17
C39	1P Family	Direct	70-79	2,123.92	15.0%	2,442.51
C39	1P Family	Payroll	0-99	938.53	15.0%	1,079.31
C39	2P Family	Direct	0-39	1,440.71	15.0%	1,656.82
C39	2P Family	Direct	40-54	1,770.01	15.0%	2,035.51
C39	2P Family	Direct	55-69	2,757.93	15.0%	3,171.62
C39	2P Family	Direct	70-79	3,251.88	15.0%	3,739.66
C39	2P Family	Payroll	0-99	1,440.71	15.0%	1,656.82
C59	Individual	Direct	0-39	1,021.80	15.0%	1,175.07
C59	Individual	Direct	40-54	1,362.38	15.0%	1,566.74
C59	Individual	Direct	55-69	2,238.19	15.0%	2,573.92
C59	Individual	Direct	70-79	2,724.75	15.0%	3,133.46
C59	Individual	Payroll	0-99	1,021.80	15.0%	1,175.07
C59	1P Family	Direct	0-39	1,226.16	15.0%	1,410.08
C59	1P Family	Direct	40-54	1,634.86	15.0%	1,880.09
C59	1P Family	Direct	55-69	2,685.84	15.0%	3,088.72
C59	1P Family	Direct	70-79	3,269.69	15.0%	3,760.14
C59	1P Family	Payroll	0-99	1,226.16	15.0%	1,410.08
C59	2P Family	Direct	0-39	1,946.25	15.0%	2,238.19
C59	2P Family	Direct	40-54	2,627.45	15.0%	3,021.57
C59	2P Family	Direct	55-69	4,379.05	15.0%	5,035.91
C59	2P Family	Direct	70-79	5,254.88	15.0%	6,043.11
C59	2P Family	Payroll	0-99	1,946.25	15.0%	2,238.19

Company Tracking Number:

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: LOA Unl Ca Rate 2009

Project Name/Number: Life Insurance Company of Alabama/082009

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Authorization Letter Approved-Closed 09/02/2009

Comments: Attachment:

LOA Auth Ltr 2009.PDF



LIFE INSURANCE COMPANY of Clabama

M. LYNN LOWE Executive Vice President & Treasurer HOME OFFICE P. O. BOX 349 GADSDEN, ALABAMA 35902 Phone: (256) 439-3205 Email: llowe@licoa.com

May 11, 2009

Wakely Actuarial Services, Inc. 34125 US Highway 19 North, Suite 310 Palm Harbor, Florida 34684

To Whom It May Concern:

The firm of Wakely Actuarial Services, Inc. is hereby authorized to submit forms, rate filings or other filings requiring actuarial certification for approval to the Department of Insurance on behalf of Life Insurance Company of Alabama. Revisions to the filings, as may be necessary to gain approval, are included in this authorization.

Sincerely,

M. Lynn Lowe

Executive Vice President & Treasurer

MLL/js